

United States Of America
Department of Transportation - Federal Aviation Administration

Supplemental Type Certificate

Number SA2716SW

This Certificate issued to AAR Aircraft Services, Inc.
DBA: AAR Aircraft Services-Oklahoma
6611 South Meridian
Oklahoma City, OK 73159-1104

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 4b of the Civil Air Regulations.

Original Product Type Certificate Number: A2SW
Make: Israel Aircraft Industries
Model: 1121, 1121A, 1121B

Description of Type Design Change:

Relocation of Thrust Reverser Hydraulic Accumulator Pressure Gauge according to Drawing 11778, Sheets 1 and 2 dated 1/17/78, or later FAA approved revision.

Limitations and Conditions:

Compatibility of this modification with other previously approved modifications must be determined by the installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application: January 24, 1978

Date reissued: 10/25/85; 3/5/99

Date of issuance: February 01, 1978

Date amended:



By direction of the Administrator

S. Frances Cox
(Signature)
S. Frances Cox, Manager
Special Certification Office,
Southwest Region

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of the Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number _____

to (Name of transferee) _____

(Address of transferee) _____
(Number and street)

(City, State, and ZIP code)

from (Name of grantor) (Print or type) _____

(Address of grantor) _____
(Number & street)

(City, State, and ZIP code)

Extent of Authority (if licensing agreement): _____

Date of Transfer: _____

Signature of grantor (In ink): _____